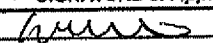


POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>7,463,251</td> </tr> <tr> <td>Filing Date</td> <td>July 13, 2006</td> </tr> <tr> <td>First Named Inventor</td> <td>Andrea Giraldo</td> </tr> <tr> <td>Title</td> <td>Display Device Having A Sparkling Effect And Method For Driving The Same</td> </tr> <tr> <td>Group Art Unit</td> <td>2629</td> </tr> <tr> <td>Examiner Name</td> <td>Vincent E. Kovalick</td> </tr> <tr> <td>Attorney Docket No.</td> <td>22173-70315</td> </tr> </table>	Application Number	7,463,251	Filing Date	July 13, 2006	First Named Inventor	Andrea Giraldo	Title	Display Device Having A Sparkling Effect And Method For Driving The Same	Group Art Unit	2629	Examiner Name	Vincent E. Kovalick	Attorney Docket No.	22173-70315
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I hereby revoke all previous powers of attorney given in the above-identified application.															
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: <div style="float: right; border: 1px solid black; padding: 5px; margin-top: 10px;">24728</div>															
<input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Practitioner(s) Name</th> <th style="width: 10%;">Registration Number</th> <th style="width: 40%;">Practitioner(s) Name</th> <th style="width: 10%;">Registration Number</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number											
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Please recognize or change the correspondence address for the above-identified application to:															
<input checked="" type="checkbox"/> The address associated with the above-mentioned Customer Number: OR <input type="checkbox"/> The address associated with Customer Number: <div style="float: right; border: 1px solid black; padding: 5px; margin-top: 10px;">24728</div>															
<input checked="" type="checkbox"/> Firm or Individual Name: Raymond J. Ho MORRIS, MANNING & MARTIN, LLP															
Address: 1333 H Street NW Suite 820															
City: Washington	State: DC														
Country: US	Zip: 20005														
Telephone: (202) 408-5153	Email: rho@mmmlaw.com														
I am the: <input type="checkbox"/> Applicant/Inventor. OR <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/06) submitted herewith or filed on _____															
SIGNATURE of Applicant or Assignee of Record															
Signature: 	Date: _____														
Name: Yung-Ching CHANG	Telephone: _____														
Title and Company: General Manager of TPO Displays Corp.															
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.															
<input checked="" type="checkbox"/> *Total of 2 forms are submitted.															